VISIT REQUEST

COPY TO:

PRIVACY ACT STATEMENT ON PAGE 2.

CHECK ONE VISITOR CLEARANCE DATA OPNAV 5521/27 (Rev. 1-75) S/N 0107-LF-055-2235 REPLY REQUIRED REPLY ONLY IF NEGATIVE (SEE CURRENT EDITION OF OPNAVINST.5510.1 FOR DETAILED INSTRUCTIONS) FROM (COMPLETE ADDRESS OF REQUESTING ACTIVITY) DATE OF REQUEST SPECIFIC PERSONNEL OR SECTION OF COMMAND TO BE VISITED **TO** (NAME AND ADDRESS OF VISITING ACTIVITY) FOLD ON THIS LINE -DURATION OF VISIT (ARRIVE) (DEPART) DEGREE OF ACCESS REQUIRED PURPOSE OF VISIT/REMARKS (IF THE VISIT IS TO A CONTRACTOR FACILITY, INCLUDE CONTRACT NUMBER IF APPROPRIATE) DATE AND PLACE OF BIRTH NATIONALITY (CHECK ONE) NAME, RANK, TITLE OR POSITION, SOCIAL SECURITY NO. LEVEL OF SECURITY CLEARANCE U.S. CITIZEN IMMIGRANT ALIEN NAME, RANK AND TITLE OF OFFICIAL AUTHORIZING VISIT AND CLEARANCE SIGNATURE

PRIVACY ACT STATEMENT

AUTHORITY: E.O. 11652

PRINCIPAL PURPOSE: Information is obtained to identify personnel visiting activities when such visits are expected to involve access to classified information.

ROUTINE USE: Information provided in the form, when compared with information known to or normally in the possession of an individual, is used in determining whether or not an individual is who he purports to be when visiting an activity. The information may be disclosed to all those charged at the activity with making the foregoing determination.

DISCLOSURE: (Mandatory or voluntary; consequences, etc.): Completion of OPNAV 5521/27, including the disclosure of your Social Security Number, is voluntary. Failure on your part, however, to answer all questions, or any misrepresentation (by omission or concealment, or by misleading, false, or partial answers), may serve as a basis for denial of the request to visit, or for access to information classified in the national interest pursuant to E.O. 11652.